CANS Technology Buzz

Coming Soon . . .

New Release of CBHI CANS Application

new release (Release 2.1), planned for Fall 2010, is being prepared for the CBHI CANS application. We will also be updating the documentation for the application ("Reference Guides" and "Learn How To" e-learning modules) on the CBHI website to reflect changes to the application. At www.mass.gov/masshealth/childbehavioralhealth, go to Information for Providers, then CANS Tools.

Read on for a preview of coming enhancements and new features.

New fields have been added

- □ We have added more Race, Ethnicity, and Language(s) selections for the member. A member can now choose more than one Race, Ethnicity, Primary Language, and Language at Home. Also, there is a "Specify" option, to further clarify selection if needed (For example: If the Ethnicity selected is "African," Specify can be used to indicate country of origin (e.g., Ethiopia, Nigeria, Ghana, etc.)
- ☐ There is now a "Referred By" field; providers can enter the referral source.

New instruction on narrative fields

Previously, the narrative fields in the CANS had the following instruction: "Describe Rational for this Domain." We have changed the instruction to "Comments," because the narrative fields should be used for a variety of purposes in addition to justifying CANS ratings. For example, we intend you to use them, when appropriate, to document important complexity not captured in the ratings.

New feature: Disputed Notes

Consistent with HIPAA requirements, this feature provides a way to indicate that a member disputes information in the record.

- A HIPAA Disputed Notes Amendment can be added to a finalized record (for records that are "Complete," "Documented on Paper," or "Incomplete but Final"). This new field allows you to enter additional information to indicate what information is disputed by the member.
- In the "View Client" tab, a new icon appears to show that a record has been flagged as having disputed information.
- The Disputed Notes can be entered by the Certified Assessor (CA), a data entry operator (DEO) on their behalf, or persons assigned the Organization role.

Reporting

We modified, or changed the names of several reports found in the drop-down menu under "Reports," and have added two new reports. Here's what you will see:

- List of your CANS records. New! This new report for CAs and Orgs replaces "CA Detailed Report by Client" and "Organization Report." You choose the date range/status and the application responds with multiple members' SED/demographic details in a spreadsheet.
- ☐ Brief CANS Summary. This popular two-page report was new as of February 2010 but was formerly called "CA Action Member Report."
- ☐ List of your Consents. This report was formerly called "Consent Report."
- Download CANS data to Excel. NEW! This report allows for multiple records to be downloaded into Excel for research and statistical purposes. It is a

much simpler process than the previous data export/import to Excel. You can choose whether you want to see records for "Documented on Paper" (just demographics and SED) or just "Complete" records with the Five through Twenty version of the tool.

Additional convenience regarding security roles

- A CA who wishes to also be a DEO (to be able to enter CANS assessments for other clinicians in same organization) will now have the ability to have both roles. To do so, a User Request Form (URF) should be submitted as a modification to request the additional role. When a user logs into the Virtual Gateway, there will be a drop down box by which you will be able to select which role you want to use for the session.
- DEOs will now have a "View CANS"/
 "View Client" tab available.
- ☐ After completing a record, CA's will now have the option to select a report (such as the Brief CANS Summary) as well as the Print-to-Screen option.

Performance

We have worked on improving performance for View, Reports, and basic navigation for Add, Edit, and Copy.

Data push to Managed Care Entities

Managed Care Entities (MCEs) will now receive daily CANS data that they can use for operations such as authorization and quality management. While this enhancement does not affect providers' use of the CBHI CANS application, it will permit MCEs to use CANS data more effectively.